

**Bulletin Number:** MSA 21-25

**Distribution:** All Providers in Prepaid Inpatient Health Plan (PIHP) Regions 6, 7 and

10

**Issued:** July 30, 2021

**Subject:** Opioid Health Home (OHH) Expansion

Effective: October 1, 2021

Programs Affected: Medicaid, Healthy Michigan Plan, MIChild

NOTE: Implementation of this policy is contingent upon approval of a State Plan Amendment (SPA) by the Centers for Medicare & Medicaid Services (CMS).

Pursuant to the requirements of Section 2703 of the Patient Protection and Affordable Care Act/Section 1945 of the Social Security Act, the purpose of this policy is to provide for the coverage and reimbursement of Opioid Health Home (OHH) services effective for dates of service on and after October 1, 2021. The policy applies to fee-for-service and managed care beneficiaries enrolled in Medicaid, the Healthy Michigan Plan, or MIChild who meet OHH eligibility criteria. In addition, the Michigan Department of Health and Human Services (MDHHS) has created a companion operation guide for providers called the OHH Handbook.

## **General Information**

MDHHS is seeking approval from CMS to revise the current OHH SPA to optimize and expand OHH services in select Michigan counties. The OHH will provide comprehensive care management and coordination services to Medicaid beneficiaries with an opioid use disorder. (Refer to bulletin MSA 20-31 for a detailed description of the OHH structure.)

#### Geographic Criteria

OHH services will be available to Medicaid beneficiaries who reside in the following counties and meet all other eligibility criteria:

- Alcona
- Alger
- Alpena
- Antrim
- Baraga
- Benzie

- Calhoun
- Charlevoix
- Cheboygan
- Chippewa
- Crawford
- Delta

- Dickinson
- Emmet
- Genesee
- Gogebic
- Grand Traverse
- Houghton

Oscoda
Otsego
Presque Isle
Roscommon
Sanilac
St. Clair
Schoolcraft
Washtenaw
Wayne
Wexford

<ul><li>losco</li></ul>	<ul> <li>Mackinac</li> </ul>	•
<ul><li>Iron</li></ul>	<ul> <li>Macomb</li> </ul>	•
<ul> <li>Kalamazoo</li> </ul>	<ul> <li>Manistee</li> </ul>	•
<ul> <li>Kalkaska</li> </ul>	<ul> <li>Marquette</li> </ul>	•
<ul> <li>Keweenaw</li> </ul>	<ul> <li>Menominee</li> </ul>	•
<ul> <li>Lapeer</li> </ul>	<ul> <li>Missaukee</li> </ul>	•
<ul> <li>Lenawee</li> </ul>	<ul> <li>Monroe</li> </ul>	•
<ul> <li>Livingston</li> </ul>	<ul> <li>Montmorency</li> </ul>	•
<ul> <li>Leelanau</li> </ul>	<ul> <li>Ogemaw</li> </ul>	•
<ul> <li>Luce</li> </ul>	<ul> <li>Ontonagon</li> </ul>	•

# Pay-for-Performance (P4P) vis a vis 5% Withhold

MDHHS will afford P4P via a 5% performance incentive to the additional per member per month case rate. The Lead Entity (LE) must distribute P4P monies to Health Home Partners (HHPs) that meet the quality improvement benchmarks. MDHHS will only claim federal match once it determines quality improvement benchmarks have been met and providers have been paid. If quality improvement benchmarks are not met by any of the HHPs within a given performance year, the MDHHS share of the withhold will be reserved by MDHHS and reinvested for OHH monthly case rate payments. Subsequent performance years will operate in accordance with this structure.

## **Metrics and Allocation**

The metrics and specifications will be maintained on the MDHHS website at www.michigan.gov/OHH. The table below represents the first set of metrics:

Performance Measure Number	Measure Name and National Quality Forum (NQF) Number (if applicable)	Measure Steward	State Baseline	Allocation Percentage of P4P Budget
1.	Initiation and engagement of alcohol and other drug (AOD) dependence treatment (0004). Initiation of AOD treatment within 14 days.	National Committee on Quality Assurance (NCQA)	TBD	50%
2.	Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD). Follow-up within 7 days after discharge.	NCQA	TBD	30%
3.	Emergency Department Utilization for Substance Use Disorder (SUD) per 1,000 Medicaid Beneficiaries.	CMS	TBD	20%

#### **Manual Maintenance**

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

#### Questions

Any questions regarding this bulletin should be e-mailed to Provider Inquiry, Department of Health and Human Services, at <a href="maileo:ProviderSupport@michigan.gov">ProviderSupport@michigan.gov</a>. When you submit questions, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

An electronic version of this document is available at <a href="www.michigan.gov/medicaidproviders">www.michigan.gov/medicaidproviders</a> >> Policy, Letters & Forms.

### **Approved**

Kate Massey, Director

**Medical Services Administration**